Paralegal Specialties
(703) 305-3734

MULTIPLE DEPENDE CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
09/762097

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.								
1								51						
2			1					52						
3				1				53						
4								54						
5			1					55						
6				1				56						
7				1				57						
8				1				58						
9				1				59						
10				1				60						
11				1				61						
12				1				62						
13				1				63						
14				1				64						
15				1				65						
16			1					66						
17			1					67						
18			1					68						
19			1					69						
20				1				70						
21				1				71						
22				1				72						
23				1				73						
24				1				74						
25				1				75						
26								76						
27								77						
28								78						
29								79						
30								80						
31								81						
32								82						
33								83						
34								84						
35								85						
36								86						
37								87						
38								88						
39								89						
40								90						
41								91						
42								92						
43								93						
44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	4		6					TOTAL IND.						
TOTAL DEP.	3		18					TOTAL DEP.						
TOTAL CLAIMS	17		24					TOTAL CLAIMS						

PTO-1360 (3-78)